

## Mountberry and Meadowlands ADULT DAY SERVICES

Winterberry Heights Church,
P.O. Box 99007,
RPO Heritage Green,
Stoney Creek, ON L8J 2P7
Phone: (905) 573-0635 EXT 23 Fax: (905) 573-9414

March 10, 2016

RECEIVED MAR 1 4 2018

Ashley Bolduc Analyst, Quality and Risk management Hamilton Niagara Haldimand Brand Local Health Integration Network 264 Main Street East Grimsby, On L3M 1P8

Dear Ashley Bolduc:

RE: 2014-2017 Hamilton Niagra Brant LHIN Multi-Sector Service Accountability Agreement 2016-2017 Schedule Amendment

Please find enclosed the original (1) of the above-mentioned contract which has been endorsed by The Governing Council of The Salvation Army in Canada. We look forward to providing continued quality care in the City of Hamilton. Thank you for your support.

Sincerely,

Karen Feltham

**Executive Director** 

haven Feltham

André Cox General

William and Catherine Booth Founders

Susan McMillan Territorial Commander

## Hamilton Niagara Haldimand Brant **LHIN** | **RLISS** de Hamilton Niagara Haldimand Brant

264 Main Street East Grimsby, ON L3M 1P8 Tel: 905 945-4930 Toll Free: 1 866 363-5446 Fax: 905 945-1992 www.hnbblhin.on.ca 264, rue Main Est Grimsby, ON L3M 1P8 Téléphone: 905 945-4930 Sans frais: 1 866 363-5446 Télécopieur: 905 945-1992 www.hnblhin.on.ca

February 4, 2016

Ms. Susan McMillan Commissioner The Governing Council of the Salvation Army in Canada, on behalf of Mountberry Adult Day Services 2 Overlea Boulevard Toronto ON M4H 1P4

Dear Ms. McMillan:

### Re: 2014-17 Multi-Sector Service Accountability Agreement

When the Hamilton Niagara Haldimand Brant Local Health Integration Network (the "LHIN") and the The Governing Council of the Salvation Army in Canada, on behalf of Mountberry Adult Day Services (the "HSP") entered into a multi-sector service accountability agreement for a three-year term effective April 1, 2014 (the "MSAA"), the budgeted financial data, service activities and performance indicators for all three years (up to and including fiscal year 2016-17) were included. The LHIN is now required to update the MSAA to include changes to Schedules B, C, D and E for the 2016-17 fiscal year.

Subject to HSP's agreement, the MSAA will be amended with effect April 1, 2016, by adding the amended Schedules B, C, D and E (the "Schedules") that are included in this letter.

To the extent that there are any conflicts between the current MSAA and this amendment, the amendment will govern in respect of the Schedules. All other terms and conditions in the MSAA will remain the same.

Please indicate the HSP's acceptance of, and agreement to this amendment, by signing below and returning one original signed copy of this letter to Ashley Bolduc, Analyst, Quality and Risk Management, HNHB LHIN, 264 Main Street East, Grimsby, ON, L3M 1P8 by **March 21, 2016.** Please also submit a signed electronic copy to <a href="https://hnhb.reporting@lhins.on.ca">hnhb.reporting@lhins.on.ca</a>. If you have any questions or concerns please contact Colleen Lynas, Advisor, Quality and Risk Management at <a href="mailto:colleen.lynas@lhins.on.ca">colleen.lynas@lhins.on.ca</a> or at 905-945-4930 ext. 4219.



Local Health Integration Network Réseau local d'intégration

#### Ms. Susan McMillan

The LHIN appreciates your organization's collaboration and hard work during this 2016-17 MSAA refresh process. We look forward to maintaining a strong working relationship with you.

Sincerely,

Donna Cripps

Chief Executive Officer

Nonna Cripps

Paul Goodyear, Secretary, The Governing Council of the Salvation Army in Canada, on C: behalf of Mountberry Adult Day Services Major Karen Feltham, Executive Director, Mounteberry Adult Day Services Michael Shea, Board Chair, HNHB LHIN

Emily Christoffersen, Director, Quality and Risk Management, HNHBLHIN Derek Bodden, Director, Finance, HNHB LHIN

encl.: Schedules B, C, D and E

#### AGREED TO AND ACCEPTED BY:

The Governing Council of the Salvation Army in Canada, on behalf of Mountberry Adult Day Services (the "HSP")

<del>Susan McMillan</del> CommissionerBryan Campbell Authorized Signing

Officer

Feb. 22, 2016

I have the authority to bind The Governing Council of the Salvation Army in Canada, on behalf of Mountberry Adult Day Services

Paul Goodyear

Secretary-

Susan McMillan

Chair

Feb. 28,20/6

I have the authority to bind The Governing Council of the Salvation Army in Canada, on behalf of Mountberry Adult Day Services

MAJOL KAREN POLIHAM

Executive Director

MOUNTBOCKY ADULT DAY STEVICES

Schedule B1: Total LHIN Funding

2016-2017

| LHIN Program Revenue & Expenses  | Row<br>#   | Account: Financial (F) Reference OHRS VERSION 9.0  | 2016-201<br>Plan Targ                             |
|--|--|--|---|
| REVENUE  |  |  |   |
| LHIN Global Base Allocation  | 1  | F 11006  | \$466   |
| HBAM Funding (CCAC only)   |  | F 11005  |   |
| Quality-Based Procedures (CCAC only)   |  | F 11004  |   |
| MOHLTC Base Allocation   | 4  | F 11010  |   |
| MOHLTC Other funding envelopes   |  | F 11014  |   |
| LHIN One Time  |  | F 11008  |   |
| MOHLTC One Time  | 7  | F 11012  |   |
| Paymaster Flow Through   |  | F 11019  |   |
| Service Recipient Revenue  |  | F 11050 to 11090   | \$181   |
| Subtotal Revenue LHIN/MOHLTC   |  | Sum of Rows 1 to 9   | \$648   |
| Recoveries from External/Internal Sources  |  | F 120°   | 675   |
| Donations 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2  |  | F 140°   | \$75  |
| Other Funding Sources & Other Revenue  | 13   | F 130° to 190°, 110°, [excl. F 11006, 11008, 11010, 11012, 11014, 11019, 11050 to 11090, 131°, 140°, 141°, 151°]   | \$15  |
| Subtotal Other Revenues  | 14   | Sum of Rows 11 to 13   | \$90  |
| TOTAL REVENUE FUND TYPE 2  | 15   | Sum of Rows 10 and 14  | \$738   |
| EXPENSES   | . = ==   |  |   |
| Compensation   |  |  |   |
| Salaries (Worked hours + Benefit hours cost)   | 17   | F 31010, 31030, 31090, 35010, 35030, 35090   | \$399   |
| Benefit Contributions  | 18   | F 31040 to 31085 , 35040 to 35085  | \$51  |
| Employee Future Benefit Compensation   |  | F 305°   |   |
| Physician Compensation   |  | F 390*   |   |
| Physician Assistant Compensation   | 21   | F 390*   |   |
| Nurse Practitioner Compensation  |  | F 380*   |   |
| Physiotherapist Compensation (Row 128)   |  | F 350*   |   |
| Chiropractor Compensation (Row 129)  | 24   | F 390*   |   |
| All Other Medical Staff Compensation Sessional Fees  |  | F 390*, [excl. F 39092]<br>F 39092   |   |
|  |  | [excl. F 460*, 465*, 560*, 565*, 69596, 69571, 72000, 62800, 45100, 69700]   |   |
| Community One Time Expense   | 29   | F 69596  |   |
| Equipment Expenses   |  | F 7*, [excl. F 750*, 780*]   |   |
| Amortization on Major Equip, Software License & Fees   | 31   | F 750*, 780*   | \$1   |
|  | 32   | F 8*   |   |
| Contracted Out Expense   |  |  |   |
| Buildings & Grounds Expenses   | 33   | F 9°, [excl. F 950°]   | \$99  |
| Buildings & Grounds Expenses Building Amortization   | 34   | F 9*   |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  | 34<br>35   | F 9* Sum of Rows 17 to 34  |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS  | 34<br>35<br>36   | F 9* Sum of Rows 17 to 34 Row 15 minus Row 35  |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS  Amortization - Grants/Donations Revenue  | 34<br>35<br>36<br>37   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151°  |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations   | 34<br>35<br>36   | F 9* Sum of Rows 17 to 34 Row 15 minus Row 35  |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER  | 34<br>35<br>36<br>37<br>38   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37   |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS  Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER  Total Revenue (Type 3)   | 34<br>35<br>36<br>37<br>38   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37   |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3)   | 34<br>35<br>36<br>37<br>38   | F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*   |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3   | 34<br>35<br>36<br>37<br>38<br>39<br>40   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37   |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL  | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41   | F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*   |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) TOTAL Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL Total Revenue (Type 1)   | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 38 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1°  |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Revenue (Type 1) Total Revenue (Type 1)   | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37 F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40   |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3)  NET SURPLUS/(DEFICIT) FUND TYPE 3  FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1   | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9°   |   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3)  NET SURPLUS/(DEFICIT) FUND TYPE 3  FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1   | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9°   | \$738<br>\$738                                    |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3)  NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Revenue (All Funds)   | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>41<br>42<br>43<br>44<br>45   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 38 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43  Line 15 + line 39 + line 42 Line 16 + line 40 + line 43  | \$738<br>\$738                                    |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3)  NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES   | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>42<br>43<br>44   | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43  Line 15 + line 39 + line 42  | \$738<br>\$738                                    |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Revenue (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES   | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>42<br>43<br>44<br>45<br>46   | F 9° Sum of Rows 17 to 34 Row 15 mlnus Row 35 F 131°, 141° & 151° Sum of Rows 38 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 mlnus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 mlnus Row 43  Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 mlnus Row 46                                    | \$738<br>\$738                                    |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres   | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>42<br>43<br>44<br>44<br>45<br>46<br>47                               | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 38 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43  Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 46  82°                               | \$73i<br>\$73i<br>\$73i                           |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres Plant Operations  | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>42<br>43<br>44<br>45<br>46<br>47                                     | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43  Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 48  82° 72 1°                         | \$738<br>\$730<br>\$730                           |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres Plant Operations Volunteer Services  | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>41<br>42<br>43<br>44<br>45<br>46<br>47                               | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43  Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 46  82° 72 1° 72 1°                   | \$73i<br>\$73i<br>\$73i                           |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3)  NET SURPLUS/(DEFICIT) FUND TYPE 3  FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1  ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres Plant Operations Volunteer Services Information Systems Support                                | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>42<br>43<br>44<br>45<br>46<br>47                                     | F 9° Sum of Rows 17 to 34 Row 15 mlnus Row 35 F 131°, 141° & 151° Sum of Rows 38 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 mlnus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 mlnus Row 43  Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 mlnus Row 46  82° 72 1° 72 1° 72 1°             | \$734<br>\$734<br>\$736<br>\$93                   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres Plant Operations Volunteer Services Information Systems Support General Administration  | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>42<br>43<br>44<br>45<br>46<br>47                                     | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43  Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 46  82° 72 1° 72 1° 72 1° 72 1°       | \$734<br>\$734<br>\$736<br>\$91                   |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Undistributed Accounting Centres Plant Operations Volunteer Services Information Systems Support General Administration Admin & Support Services   | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>42<br>43<br>44<br>45<br>46<br>47<br>48<br>49<br>50<br>51<br>51<br>52 | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 38 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43  Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 46  82° 72 1° 72 1° 72 1° 72 1° 72 1° | \$738<br>\$738<br>\$738<br>\$738<br>\$738<br>\$99 |
| Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2  NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Revenue (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres Plant Operations Volunteer Services Information Systems Support General Administration | 34<br>35<br>36<br>37<br>38<br>39<br>40<br>41<br>42<br>43<br>44<br>45<br>46<br>47                                     | F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40  F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43  Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 46  82° 72 1° 72 1° 72 1° 72 1°       | \$734<br>\$734<br>\$736<br>\$91                   |

Schedule B2: Clinical Activity- Summary

2016-2017

| Service Category 2016-2017 Budget               |          | equivalente (FTE) | House, Card. Dul |     | Monary of Cars In-<br>House &<br>Contracted Out | Days | Individuals Served<br>by Functional<br>Contre |       | Group Sessions of<br>of group sessions<br>not individuals) | Mast Delivered-<br>Combined | Group Parlicipant<br>Attendences (Reg<br>& Man-Reg) | Barrios Previder<br>Internations | Service Francisco<br>Group Interpolitors | Secolors |
|---|----------|-------------------|------------------|-----|---|------|---|-------|--|-----------------------------|---|----------------------------------|--|----------|
| CSS In-Home and Community Services (CSS IH COM) | 72 5 82* | 9.73              | 0                | 1 0 | 1 0   | 0    | 200   | 9,600 | 0  | 0                           | 1 0   | 0                                | 0  | 0        |

## Schedule C: Reports Community Support Services 2016-2017

Health Service Provider: The Governing Council Of The Salvation Army in Canada, on behalf of Mountberry Adult Day Services

## Only those requirements listed below that relate to the programs and services that are funded by the LHIN will be applicable.

A list of reporting requirements and related submission dates is set out below. Unless otherwise indicated, the HSP is only required to provide information that is related to the funding that is provided under this Agreement. Reports that require full entity reporting are followed by an asterisk "\*".

| OHRS/MIS Trial Balance Su | bmission (through OHFS)        |
|---------------------------|--------------------------------|
| 2014-2015                 | Due Dates (Must pass 3c Edits) |
| 2014-15 Q1                | Not required 2014-15           |
| 2014-15 Q2                | October 31, 2014               |
| 2014-15 Q3                | January 31, 2015               |
| 2014-15 Q4                | May 30, 2015                   |
| 2015-16                   | Due Dates (Must pass 3c Edits) |
| 2015-16 Q1                | Not required 2015-16           |
| 2015-16 Q2                | October 31, 2015               |
| 2015-16 Q3                | January 31, 2016               |
| 2015-16 Q4                | May 31, 2016                   |
| 2016-17                   | Due Dates (Must pass 3c Edits) |
| 2016-17 Q1                | Not required 2016-17           |
| 2016-17 Q2                | October 31, 2016               |
| 2016-17 Q3                | January 31, 2017               |
| 2016-17 Q4                | May 31, 2017                   |

| Supplementary Reporting - | Quarterly Report (through SRI)  |
|---------------------------|---|
| 2014-2015                 | Due five (5) business days following Trial<br>Balance Submission Due Date |
| 2014-15 Q2                | November 7, 2014  |
| 2014-15 Q3                | February 7, 2015  |
| 2014-15 Q4                | June 7, 2015 – Supplementary Reporting Due                                |
| 2015-2016                 | Due five (5) business days following Trial Balance Submission Due Date    |
| 2015-16 Q2                | November 7, 2015  |
| 2015-16 Q3                | February 7, 2016  |
| 2015-16 Q4                | June 7, 2016 - Supplementary Reporting Due                                |
| 2016-2017                 | Due five (5) business days following Trial<br>Balance Submission Due Date |
| 2016-17 Q2                | November 7, 2016  |
| 2016-17 Q3                | February 7, 2017  |
| 2016-17 Q4                | June 7, 2017 – Supplementary Reporting Due                                |

# Schedule C: Reports Community Support Services 2016-2017

Health Service Provider: The Governing Council Of The Salvation Army in Canada, on behalf of Mountberry Adult Day Services

Annual Reconciliation Report (ARR) through SRI and paper copy submission\*

(All HSPs must submit both paper copy ARR submission, duly signed, to the Ministry and the respective LHIN where funding is provided; soft copy to be provided through SRI)

| Fiscal Year | Due Date      |
|-------------|---------------|
| 2014-15 ARR | June 30, 2015 |
| 2015-16 ARR | June 30, 2016 |
| 2016-17 ARR | June 30, 2017 |

| <b>Board Approved Audited Fi</b> | nancial Statements * |
|----------------------------------|----------------------|
| Fiscal Year                      | Due Date             |
| 2014-15                          | June 30, 2015        |
| 2015-16                          | June 30, 2016        |
| 2016-17                          | June 30, 2017        |

| Declaration of Compliance |               |  |  |  |
|---------------------------|---------------|--|--|--|
| Fiscal Year               | Due Date      |  |  |  |
| 2013-14                   | June 30, 2014 |  |  |  |
| 2014-15                   | June 30, 2015 |  |  |  |
| 2015-16                   | June 30, 2016 |  |  |  |
| 2016-17                   | June 30, 2017 |  |  |  |

| Community Support Services - C | Other Reporting Requirements |
|--------------------------------|------------------------------|
| Requirement                    | Due Date                     |
| French language service Report | 2014-15 - April 30, 2015     |
|                                | 2015-16 - April 30, 2016     |
|                                | 2016-17 - April 30, 2017     |

## Schedule D: Directives, Guidlelines and Policies Community Support Services

2016-2017

Health Service Provider: The Governing Council Of The Salvation Army in Canada, on behalf of Mountberry Adult Day Services

Only those requirements listed below that relate to the programs and services that are funded by the LHIN will be applicable.

- Personal Support Services Wage Enhancement Directive, 2014
- Community Financial Policy, 2015
- Policy Guideline for CCAC and CSS Collaborative Home and Community-Based Care Coordination, 2014
- Policy Guideline Relating to the Delivery of Personal Support Services by CCACs and CSS Agencies, 2014
- Protocol for the Approval of Agencies under the Home Care and Community Services Act, 1994, 2015
- Assisted Living Services for High Risk Seniors Policy, 2011 (ALS-HRS)
- Community Support Services Complaints Policy (2004)
- Assisted Living Services in Supportive Housing Policy and Implementation Guidelines (1994)
- Attendant Outreach Service Policy Guidelines and Operational Standards (1996)
- Screening of Personal Support Workers (2003)
- Ontario Healthcare Reporting Standards OHRS/MIS most current version available to applicable year
- Guideline for Community Health Service Providers Audits and Reviews, August 2012

### **Schedule E1: Core Indicators**

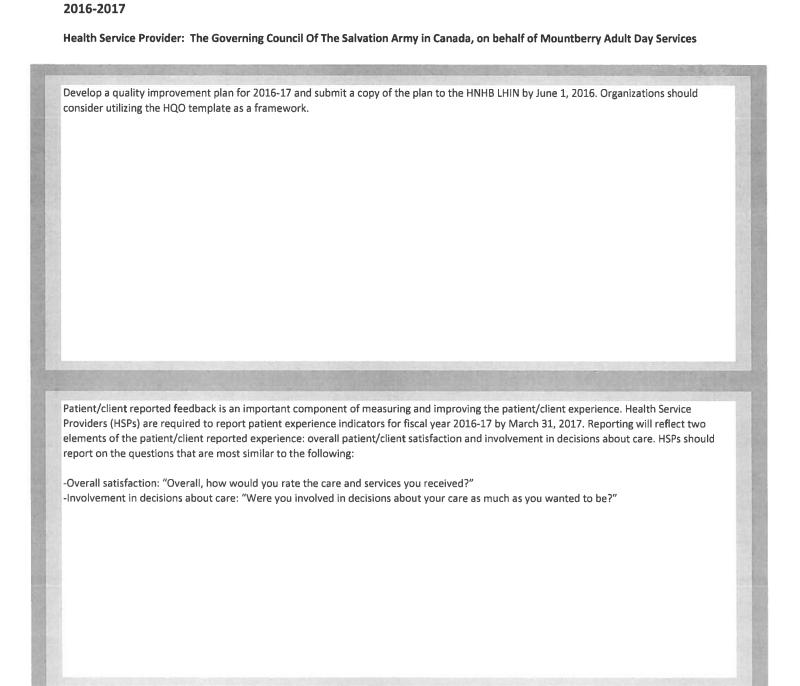
\*\* No negative variance is accepted for Total Margin

2016-2017

| Performance Indicators   | 16-17<br>916-2017<br>Target | Performance<br>Standard |
|--|-----------------------------|-------------------------|
| Balanced Budget - Fund Type 2  | \$0                         | >=0                     |
| Proportion of Budget Spent on Administration   | 31.3%                       | <=37.5%                 |
| *Percentage Total Margin   | 0.00%                       | >= 0%                   |
| Percentage of Alternate Level of Care (ALC) days (closed cases)  | 9.46%                       | <10.41%                 |
| /ariance Forecast to Actual Expenditures   | 0                           | < 5%                    |
| Variance Forecast to Actual Units of Service   | 0                           | < 5%                    |
| Service Activity by Functional Centre  | Refer to edule E2a          | -                       |
| Number of Individuals Served   | Refer to<br>edule E2a       | -                       |
| Alternate Level of Care (ALC) Rate   | 12.7%                       | <13.97%                 |
| Explanatory Indicators   |                             |                         |
| Cost per Unit Service (by Functional Centre)   |                             |                         |
| Cost per Individual Served (by Program/Service/Functional Centre)  |                             |                         |
| Client Experience  |                             |                         |
| Budget Spent on Administration- AS General Administration 72 1 10  |                             |                         |
| sadget opont on the control of the c |                             |                         |
| Budget Spent on Administration- AS Information Systems Support 72 1 25   |                             |                         |
|  |                             |                         |

## Schedule E2a: Clinical Activity- Detail 2016-2017

| OHRS Description & Functional Centre                                     |                          | 2016-2017 |                         |  |  |
|--|--------------------------|-----------|-------------------------|--|--|
| These values are provided for information purposes only. They are not Ac | countability Indicators. | Target    | Performance<br>Standard |  |  |
| Administration and Support Services 72 1*                                |                          |           |                         |  |  |
| Full-time equivalents (FTE)  | 72 1*                    | 1.27      | n/a                     |  |  |
| Total Cost for Functional Centre   | 72 1*                    | \$230,975 | n/a                     |  |  |
| CSS IH - Day Services 72 5 82 20   |                          |           |                         |  |  |
| Full-time equivalents (FTE)  | 72 5 82 20               | 9.73      | n/a                     |  |  |
| ndividuals Served by Functional Centre                                   | 72 5 82 20               | 200       | 160 - 240               |  |  |
| Attendance Days Face-to-Face   | 72 5 82 20               | 9,600     | 9120 - 10080            |  |  |
| Total Cost for Functional Centre   | 72 5 82 20               | \$507,671 | n/a                     |  |  |
| ACTIVITY SUMMARY   |                          |           |                         |  |  |
| Total Full-Time Equivalents for all F/C                                  |                          | 11.00     | n/a                     |  |  |
| Total Individuals Served by Functional Centre for all F/C                |                          | 200       | 160 - 240               |  |  |
| Total Attendance Days for all F/C  |                          | 9,600     | 9120 - 10080            |  |  |
| Total Cost for All F/C   |                          | \$738,646 | n/a                     |  |  |



Schedule E3a Local: All

| rate | ipate in applicable initiatives or strategies related to the health system transformation agendas of Patients First and/or HNHB LH<br>gic Health System Plan. This includes, but is not limited to, actively working with Health Links lead organizations to support and a<br>n Links performance objectives in Hamilton Niagara Haldimand Brant LHIN. |       |
|------|--|-------|
|      |  |       |
|      |  |       |
|      |  |       |
|      |  |       |
|      |  | 5000  |
|      | to meet the targets for health system performance indicators. Engage in activities, including LHIN-wide initiatives, which result in strated improving performance trends on relevant MLAA indicators.   | n the |
|      |  |       |
|      |  |       |
|      |  |       |
|      |  |       |
|      |  |       |

Schedule E3a Local: All